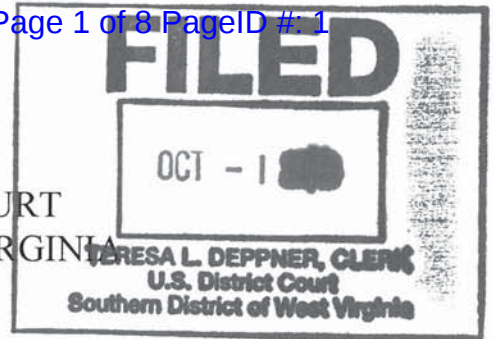


UNITED STATES DISTRICT COURT  
SOUTHERN DISTRICT OF WEST VIRGINIA



Jeremy A Johnson, Duane Maynard

0001153465, 0001585488

Norman Dillon, Alton Fribble

0001174899, 0002605183

Timothy Jackson, William Wray

0001141213, 0002526159

STEVEN DAVIS, Willie Slocum

0001138283, 0002608909

*(Enter above the full name of the plaintiff  
or plaintiffs in this action).*

*(Inmate Reg. # of each Plaintiff)*

**VERSUS**

**CIVIL ACTION NO.** 3:14-cv-26249

*(Number to be assigned by Court)*

West Virginia Regional Jail + Correctional Fac. Auth.

Western Regional Jail

Cabell County

SRT Director Austin Burke

*(Enter above the full name of the defendant  
or defendants in this action)*

**COMPLAINT**

**I. Previous Lawsuits**

- A. Have you begun other lawsuits in state or federal court dealing with the same facts involved in this action or otherwise relating to your imprisonment?

Yes \_\_\_\_\_

No ✓

B. If your answer to A is yes, describe each lawsuit in the space below. (If there is more than one lawsuit, describe the additional lawsuits on another piece of paper, using the same outline).

1. Parties to this previous lawsuit:

Plaintiffs: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

Defendants: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

2. Court (if federal court, name the district; if state court, name the county);

\_\_\_\_\_

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3. Docket Number: \_\_\_\_\_

4. Name of judge to whom case was assigned:

\_\_\_\_\_

5. Disposition (for example: Was the case dismissed? Was it appealed? Is it still pending?)

\_\_\_\_\_

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6. Approximate date of filing lawsuit: \_\_\_\_\_

7. Approximate date of disposition: \_\_\_\_\_



(In item C below, place the full name of the defendant in the first blank, his/her official position in the second blank, and his/her place of employment in the third blank. Use item D for the names, positions, and places of employment of any additional defendants.)

- C. Defendant: Austin Burke  
is employed as: SRT Director  
at West Virginia Regional Jail + Correctional facility Authority
- D. Additional defendants: Western Regional Jail, West Virginia  
Regional Jail + Correctional Facility Authority,  
Cabell County

#### IV. Statement of Claim

State here as briefly as possible the facts of your case. Describe how each defendant is involved. Include also the names of other persons involved, dates and places. Do not give any legal arguments or cite any cases or statutes. If you intend to allege a number of related claims, set forth each claim in a separate paragraph. (Use as much space as you need. Attach extra sheets if necessary.)

On July 18<sup>th</sup> 2014 at approximately 10:00pm, an inmate fight  
broke out. A total of 6 inmates were involved in this, as  
can be verified by institution cameras. At approximately  
10:10pm, when officers arrived to lock our unit (F-4)  
down, they took the victim to medical. From that  
time to Aug. 1<sup>st</sup> 2014 we were all under I.A. lockdown.  
During that time we were all denied showers for the  
first 100 hours, then we were given showers but they



**IV. Statement of Claim (continued):**

refused to give us soap, toothpaste, toothbrush, nothing!  
 They refused us shift supervisors when asked. They also  
 took away our 1 hour uncirculated air (outside rec). Also  
 no mail of anysort Legal or not, in coming or going rec.  
 No phone calls not even our attorney. No visitation  
 No Laundry service, No Law Library, The nurse's sented  
 we were not allowed to go to medical, for any reason  
 Further more we grieved this situation as far as any  
 institution would allow us. (Xgrievances to administrator)

**V. Relief**

State briefly exactly what you want the court to do for you. Make no legal arguments.  
 Cite no cases or statutes.

We would like to see steps taken to ensure this does  
 not happen in the future, so that no one else has to  
 go through what we did. Also we would like to see  
 those responsible for this held accountable and punished.  
 Finally we would like to receive monetary compensation  
 for our unlawful punishment and suffering.

West Virginia Regional Jail Authority is responsible for allowing the system to operate in this manner and for employing Director Burke. Western Regional Jail is responsible for not putting a stop to the injustices done to us. Cabell County is responsible for placing us in the Western Regional Jail where this could happen.

SRT Director Austin Burke is responsible for our being locked down without due process and for imposing the barbaric regulations that the Western Regional Jail staff were forced to carry out. We were told numerous times that he was solely behind everything done to us and that everyone feared for their jobs, should they try to help us.

**V. Relief (continued)):**

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**VII. Counsel**

- A. If someone other than a lawyer is assisting you in preparing this case, state the person's name:

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- B. Have you made any effort to contact a private lawyer to determine if he or she would represent you in this civil action?

Yes \_\_\_\_\_

No ✓

If so, state the name(s) and address(es) of each lawyer contacted:

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If not, state your reasons: \_\_\_\_\_

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- C. Have you previously had a lawyer representing you in a civil action in this court?

Yes \_\_\_\_\_

No ✓

If so, state the lawyer's name and address:

Signed this 29th day of September, 2014.

Jon Joh - Steven A Davis Jr  
Willie Way - Willie Lee  
Timothy Jackson  
Norman Davis  
Signature of Plaintiff or Plaintiffs

I declare under penalty of perjury that the foregoing is true and correct.

Executed on 9/29/14  
(Date)

Jon Joh  
Signature of Moyant/Plaintiff

\_\_\_\_\_  
Signature of Attorney  
(if any)